FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR HNIFODM I IMITED OFFEDING EVENDER

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OMB APPROVAL OMB Number: 3235-0076 Expires: Estimated average burden hours per response. 16.00

| SEC USE | ONLY |
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| ONI | PORM EIMITED OFFERING EXEM | IFIION |
|---|--|---|
| Name of Offering (check if this is an ar | nendment and name has changed, and indicate change.) | BBoo |
| | Rule 504 Rule 505 Rule 506 Section 4(6) | |
| | | APR 1.8 2007 |
| | A. BASIC IDENTIFICATION DATA | • |
| 1. Enter the information requested about the | issuer | THOMSON |
| Name of Issuer (check if this is an amen R.B. Haley One, LLC | dment and name has changed, and indicate change.) | FINANCIAL |
| Address of Executive Offices 16625 Dove Canyon Rd., Ste. 102-507 S | (Number and Street, City. State, Zip Code) San Diego CA 92127 | Telephone Number (Including Area Code) 619-203-6597 |
| Address of Principal Business Operations (if different from Executive Offices) | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| Brief Description of Business Real Estate Ownership | | APIL 2007 |
| | imited portnarship, to be Council | please specify): |
| Actual or Estimated Date of Incorporation or C urisdiction of Incorporation or Organization: | Month Year | nated |
| GENERAL INSTRUCTIONS | | |
| Gederal: | | |

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Libby Renee Rogers Business or Residence Address (Number and Street, City, State, Zip Code) 16625 Dove Canyon Rd., Ste. 102-507 San Diego CA 92127 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Rusiness or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City. State. Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

| | | | | В, | INFORMA | TION ABO | OUT OFFEI | RING | | | | - |
|-----------------------------|--|--|------------------------------------|---|--|--|---|---|----------------------|----------------------|----------------|----------------------|
| I. Hast | he issuer se | ald or does | the issuer | intend to | call to non | aga-udit. | | in all to se | | · | Yes | No |
| | ne todaer se | old, or does | | | | | | in this offe g under UL | | | ···· <u> </u> | ▣ |
| 2. What | is the mini | mum inves | | | | | | | | | . 50 | 00.000,0 |
| | | | | | | | | | | | V-c | No |
| | | g permit joi | | | | | | | | | | [NO |
| If a po or sta a brol | erson to be l tes, list the r ker or deale | ation reque milar remun isted is an a name of the r, you may | ssociated posterior or set forth t | r solicitatio person or a; dealer. If n | on of purcha gent of a brandi nore than fi | isers in con oker or dea ve (5) pers | nection wit ler register ons to be li | th sales of seed with the sted are ass | ecurities in | the offering | ıg. | |
| Full Name N/A | (Last name | e first, if in | diviđual) | - | ··· | | | | · · · | | | |
| | r Residence | e Address (| Number at | nd Street (| Tity State | Zin Code | | | | <u> </u> | | |
| | | | | io on con c | ony, state. | Zip Code) | | | | | | |
| Name of A | ssociated E | Broker or De | ealer | | | | | | | · | | |
| States in V | Vhich Perso | n Listed Ha | s Salicite | d or Intend | e to Solicit | Durchass | | | | | | |
| | | es" or check | | | | | | | | | | W G |
| AL | | | | , | | | | | | | [] A | II States |
| IL MT RI | AK IN NE SC | AZ IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | CT ME NY VT | MD NC VA | MA ND WA | FL MI OH WV | GA MN OK WI | MS OR WY | ID MO PA PR |
| Full Name | (Last name | first, if ind | ividual) | | <u></u> | | | | · | ··· | | |
| Rusiness of | r Pecidana | . Addm | N71 | 10 | | | | V | | | | |
| Business of | , residence | c Address (| Number at | ia Street, C | Jity, State, | Zip Code) | | | | | | |
| Name of A | ssociated B | roker or De | aler | | | | | | | | - | |
| States in W | hich Person | 1 Listed Ho | c Calinit - J | | 0.17.6 | | | | | | | - <u>-</u> |
| | | s" or check | | | | | | • | •••••• | | . <u> </u> Al | l States |
| AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | (Tim) | الت |
| TL. | ĪN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS MS | MO |
| MT RI | NE SC | NV SD | NH | NJ | NM | NY | NC | ND | OH | OK. | OR | PA |
| | | | TN | TX | UT | VŤ | VA | WA | WV | WI | WŸ | PR |
| Full Name (| (Last name | first, if indi | vidual) | | - | _ | | | | _ | | |
| Business or | Residence | Address (N | Jumber an | d Street, C | ity, State, 2 | Zip Code) | - | | | | | _ |
| Name of As | Sociated Br | oker or Dea | lar | | | | | | <u>-</u> | | | |
| | _ | ORCI OI DEA | 1101 | | | | | | | | | |
| States in Wi | | | | | | | | | - | | - | |
| (Check | "All States | " or check i | ndividual | States) | | | • | | •••••• | | ☐ AII | States |
| AL | AK | AZ | ÄR | CA | CO | [CT] | DE | DC | FL | GA | HI] | [IR] |
| IL. | N] | IA | KS | KŸ | LA | ME | MD | MA | MI | MN | MS] | ID MO |
| MT RI | NE SC | NV SD | NH | NJ TX | NM UT | NY VT | NC VA | ND WA | OH WV | OK WI | OR WY | PA PR |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| ι. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
|----|--|---|----------------------------|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | Debt | s 0.00 | s 0.00 |
| | Equity | 0.00 | s 0.00 |
| | Common Preferred | *** | |
| | Convertible Securities (including warrants) | 0.00 | 0.00 \$ |
| | Partnership Interests | 3,500,000.00 | \$ 50,000.00 |
| | Other (Specify) | 0.00 | \$ 0.00 |
| | Total | 3,500,000.00 | \$ 50,000.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number | Aggregate Dollar Amount |
| | | Investors | of Purchases |
| | Accredited Investors | | \$ |
| | Non-accredited Investors | | \$ |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | · |
| | Type of Offering | Type of | Dollar Amount |
| | | Security | Sold |
| | Rule 505 | *** | \$ |
| | Rule 504 | | \$ |
| | Total | | \$ \$ 0.00 |
| ļ | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | , | \$_0.00 |
| | Transfer Agent's Fees | _ | ¢ |
| | Printing and Engraving Costs | | \$ |
| | I.egai Fees | | \$ \$ 35,000.00 |
| | Accounting Fees | | 5 |
| | Engineering Fees | | • |
| | Sales Commissions (specify finders' fees separately) | | \$ 140,000.00 |
| | Other Expenses (identify) Oversight Management Fee | | s 140,000.00 |
| | Total | | s 315,000,00 |

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I | ROCEEDS | |
|------|--|--|--|
| | b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | | 3,185,000.00 |
| 5. | Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. | | |
| | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | | |
| | Purchase of real estate |]\$ | ✓ \$ 3,000,000.0 |
| | Purchase, rental or leasing and installation of machinery and equipment | 7\$ | □\$ |
| | Construction or leasing of plant buildings and facilities | ┐\$ | |
| | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | | _ |
| | Repayment of indebtedness | 」³——— ¬ ¢ | . U 3—.——— |
| | Working capital | | |
| | Other (specify): | | |
| | |]\$ | \$ |
| | Column Totals | \$ 0.00 | S 3,185,000.0 |
| | Total Payments Listed (column totals added) | | 185,000.00 |
| | D. FEDERAL SIGNATURE | | |
| sign | issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice ature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commissinformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R | ion upon writte | le 505, the following n request of its staff, |
| Issu | er (Print or Type) Signature [| ate | |
| Ŕ.E | 3. Haley One, LLC | April 6, 2007 | |
| Van | ne of Signer (Print or Type) / ttle of Signer (Print or Type) | | · · · · · · · · · · · · · · · · · · · |
| _ | ene A Trowbridge Attorney for Issuer | | |

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNATURE | | |
|----------------------|--|---------------------|----------------------------|
| 1. | 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | Yes | No 🔀 |
| | See Appendix, Column 5, for state response. | | |
| 2. | 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is file D (17 CFR 239.500) at such times as required by state law. | ed a not | icc on Forn |
| 3. | 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information issuer to offerees. | on furni | shed by th |
| 4. | 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entit limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied. | led to t ing the | he Uniform availability |
| The issu duly aut | e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf y authorized person. | by the u | ındersigned |
| lssuer (I | ner (Print or Type) Signature Date | | |
| R.B. Hal | Haley One, LLC April 6, 2007 | | |
| Name (P | ne (Print or Type) The (Print or Type) | | |
| Eugene | gene A Trowbridge Attorney for Issuer | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | | | | A | PPENDIX | | | | |
|---------|--------------------------------|--|--|--------------------------------------|-------------|---|----------|--|----|
| 1 | Intend to non-a investor | d to sell accredited rs in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | amount pu | 4 f investor and archased in State to C-Item 2) | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL | | | | | | | | | |
| AK | | | | | | | | | |
| AZ | | | | | | | | | 1 |
| AR | | | | | | | | | |
| CA | | X | \$3,500,000 | 1 | \$50,000.00 | 0 | \$0.00 | | X |
| со | | | | | | | | | |
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| MN | | and the same of th | | | | | | | |
| MS | | | | | | | | | |

APPENDIX 2 ı 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No МО MT NE NV NH NJ NM NY NC ND ОН OK OR PΑ RI SC SD TN TX UT VTVA WAWV WI

| | | | | APP | ENDIX | | | | | | | | |
|-------|---------|---|--|---|--------|--|--------|-----|-------------|--|--|--|--|
| 1 | | 2 | 3 | 3 4 | | | 4 | | | | | | |
| | to non- | d to sell accredited rs in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | Type of investor and amount purchased in St | | Type of investor and amount purchased in State (Part C-Item 2) | | | | | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | | | |
| WY | | 1 | | | | | | | | | | | |
| PR | | | | | | | | | | | | | |

END